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CONFIRMATION NO. 8436

<b>SERIAL NUMBER</b> 10/800,064	<b>FILING OR 371(c) DATE</b> 03/12/2004 <b>RULE</b>	<b>CLASS</b> 082	<b>GROUP ART UNIT</b> 3722	<b>ATTORNEY DOCKET NO.</b> 7936.002	
<b>APPLICANTS</b> Keith Clark, Oklahoma City, OK; <i>SA</i>					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/455,099 03/14/2003 <i>SA</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>NON</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 05/29/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Sana A. H. 1/18/06</i> <i>SA</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OK	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> <i>11</i> 15	<b>INDEPENDENT CLAIMS</b> <i>8</i> 2
<b>ADDRESS</b> 30589					
<b>TITLE</b> Hollowing system					
<b>FILING FEE RECEIVED</b> 450	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		